08/20/2009 18:05

Image# 29992629578

# FORM 3X

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

		For Ot	iner I nan An	Autnorize	ea Commi	ittee		Office Us	e Only	
1.			EC MAILING LAE PE OR PRINT	_	xample:If typi ver the lines	ng, type				
Ш	American Health Care Associ	ation Po	olitical Action Com	mittee						
Ш										
AD	DRESS (number and street)	1201	L Street, NW							
	Check if different									
L	than previously reported. (ACC)	Was	shington				DC		0005	
2.	FEC IDENTIFICATION NUM	BER	<b>~</b>	CITY 🗥			STATE		ZIPCODE	<b>A</b>
	C00006080		;	3. IS THIS REPOR		NEW (N) OR		AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	. ,	Monthly Report Due On:	Feb 20 (M	2)	May 20 (M5)	X	Aug 20 (M8)		Nov 20 (M11) Non-Election Year Only)
	(a) Quarterly Reports:			Mar 20 (M	3)	Jun 20 (M6)		Sep 20 (M9)		Dec 20 (M12) Non-Election Year Only)
	April 15			Apr 20 (M	4)	Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
	Quarterly Report(Q		(c) 12-Day		Primary (1	2P)	Gen	eral (12G)		Runoff (12R)
	July 15 Quarterly Report(Q2		PRE-Election				=	, ,		,
	October 15 Quarterly Report(QC	3)	Report for the	ie:	Convention	1 (120)	Spe	cial (12G)		
	January 31 Quarterly Report(YE		E	Election on					in the State of	
	July 31 Mid-Year Report(Non-election Year Only) (MY)	1 (	(d) 30-Day  Post -Elect Report for the		General (3	0G)	Run	off (30R)		Special (30S)
	Termination Report (TER)		·	Election on			•		in the State of	
5.	Covering Period 0 7		01 200	9	through	0 7	31	2009		
l ce	ertify that I have examined this F			ny knowledge	e and belief it	is true, correct	and comp	lete.		
Тур	e or Print Name of Treasurer	Ms.	. Gail Clarkson							
Sig	nature of Treasurer Electror	nically Fil	led by Ms. Gail	l Clarkson			Date	08 20	2	2009
NO	TE : Submission of false, erron	ieous, or	r incomplete inforr	nation may s	subject the pe	erson signing th	is Report	o the penalties	of 2 U.S.	C 437g.
	Office Use								FORM	

FE6AN026

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2 / 58

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name American Health Care Association Political Action Committee

	eport Covering the Period: From:	COLUMN A	COLUMN B
	-	This Period	Calendar Year-to-Date
6.	(a) Cash on Hand January 1 $2009^{Y}$ Y		121831.57
	(b) Cash on Hand at Begining of Reporting Period	146325.82	
	(c) Total Receipts (from Line 19)	102991.19	586060.44
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	249317.01	707892.01
7.	Total Disbursements (from Line 31)	84686.31	543261.31
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	164630.70	164630.70
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on	0.00	1

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 58

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period:

From: 0.7

D D D

2009

· . .

м°м 0 7 D D 31

<sup>Y</sup> 2009

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:     (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	96863.50	533009.40
(ii) Unitemized	5127.69	43051.04
(iii) TOTAL (add Lines 11(a)(i) and (ii)	101991.19	576060.44
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	1000.00	10000.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	102991.19	586060.44
Transfers From Affiliated/Other     Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received     Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made     to Federal candidates and Other     Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	102991.19	586060.44
Total Federal Receipts     (subtract Line 18(c) from Line 19)	102991.19	586060.44

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 58

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	1186.31	8391.31
Expenditures(c) Total Operating Expenditures	1100.31	8391.31
(add 21(a)(i), (a)(ii) and (b))	1186.31	8391.31
. Transfers to Affiliated/Other Party		
Committees  Contributions to	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	83500.00	534870.00
Independent Expenditure		
(use Schedule E) Coordinated Expenditures Made by Party	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
. Loans Made	0.00	0.00
. Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
(400		
Other Disbursements	0.00	0.00
. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(7) - 5551 & 511415	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	84686.31	543261.31
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	04000.04	E40004 04
from Line 31)	84686.31	543261.31

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 58

III. I	Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ntributions (other than loans)	102991.19	586060.44
	ntribution Refunds e 28(d))	0.00	0.00
	ibutions (other than loans) Line 34 from Line 33)	102991.19	586060.44
	leral Operating Expenditures 21(a)(i) and Line 21(b))	1186.31	8391.31
	o Operating Expenditures e 15, page 3)	0.00	0.00
•	ating Expenditures Line 37 from Line 36)	1186.31	8391.31

FE6AN026

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 58 (check only one)    X
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Health Care Association Po	litical Action	Committee	
۱.	Full Name (Last, First, Middle Initial) Tom Accomando Mailing Address Green Valley Health (	Name and Dak		Date of Receipt
	6850 Rufe Snow Drive			07 28 7 2009
	City	State	Zip Code	Transaction ID: C761324
	Watauga FEC ID number of contributing federal political committee.	C	76148	Amount of Each Receipt this Period 383.00
	Name of Employer Green Valley Health Care and Rehabilit Receipt For:	Occupation Administ	rator	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 383.00	
. –	Full Name (Last, First, Middle Initial) Steve Ackerson	<u> </u>		Date of Receipt
	Mailing Address 6750 Westown Pkwy Ste 100			07 08 2009
	City	State	Zip Code	Transaction ID: C747659
	West Des Moines	<u>IA</u>	50266-7716	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2400.00
	Name of Employer Iowa Health Care Assn.	Occupation Executive	n e Director	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	4500.00	
	Full Name (Last, First, Middle Initial) Hollie Adams			Date of Receipt
	Mailing Address 2759 County Road 14	90		07 21 2009
	City	State	Zip Code	Transaction ID: C759407
	Center	TX	75935	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		550.00
	Name of Employer Green Acres of Center	Occupation Administ		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional) .	1		3333.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16
nny information copied from such Reports and r for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Health Care Association F	he name and address of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Gary D Anderson		Date of Receipt
Mailing Address 6618 McMakin Court	t	07 21 2009
City	State Zip Code	Transaction ID: C759406
Colleyville	TX 76034-5752	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Preferred Care Partners Management Gro	Occupation President/Management Company	,
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) Gary Attman		Date of Receipt
Mailing Address 8028 Ritchie Highwa Suite 118		07 10 7 2009
City	State Zip Code	Transaction ID: C751211
Pasadena	MD 21122-1069	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer FutureCare Health & Mgmt.	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3750.00	
Full Name (Last, First, Middle Initial) Mary Baker		Date of Receipt
Mailing Address PO Box 1129		07 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C746799
Turlock	CA 95381	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer Mark One Corp.	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3750.00	
SURTOTAL of Receipts This Page (optional)		4750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 58 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Health Care Association P	he name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)	Ontical Action	Committee	T
A. Mary Baker			Date of Receipt
Mailing Address PO Box 1129	07 27 2009		
City Turlock	State CA	Zip Code	Transaction ID: C761016
FEC ID number of contributing federal political committee.	C	95381	Amount of Each Receipt this Period  1250.00
Name of Employer Mark One Corp.	Occupatio Administ		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) Terry Bane Mailing Address 1469 Humboldt Rd			Date of Receipt
# 175 City	State	Zip Code	0 7 2 2 2 0 0 9  Transaction ID: C759697
Chico	CA	95928-9116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer President	Occupatio Riverside	n e Health Care Corp.	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	]
Full Name (Last, First, Middle Initial) David Beck			Date of Receipt
Mailing Address 1250 H Street, NW Suite 555			07 28 2009
City Washington	State DC	Zip Code 20005-3965	Transaction ID: C761981  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20003-3903	125.00
Name of Employer Golden Living	Occupatio Governm	n nent Relations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1625.00
TOTAL This Period (last page this line numb	er only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
2	American Health Care Association Po	litical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Brad Bedell Mailing Address PO Box 1210			Date of Receipt
	731 North Main			07 31 2009
	City Sikeston	State MO	Zip Code 63801-1210	Transaction ID: C762877  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	000011210	1250.00
	Name of Employer Health Facilities Managem- ent	Occupation Presiden		
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3750.00	
В.	Full Name (Last, First, Middle Initial) Don C. Bedell			Date of Receipt
	Mailing Address 731 North Main Street PO Box 1210	<u> </u>		07 31 4 2009
	City Sikeston	State MO	Zip Code 63801	Transaction ID: C762878
	FEC ID number of contributing federal political committee.	C	03001	Amount of Each Receipt this Period  1250.00
	Name of Employer Castle Partners	Occupation Presiden		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3750.00	
_ С.	Full Name (Last, First, Middle Initial) Elton Beebe, Jr.			Date of Receipt
	Mailing Address 1308 Bruton Springs I	Road		07 23 2009
	City	State	Zip Code	Transaction ID: C761183
	Austin  FEC ID number of contributing federal political committee.	C	78733	Amount of Each Receipt this Period  1250.00
	Name of Employer Louisiana Extended Care Centers	Occupatio Owner	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3750.00	
	SUBTOTAL of Receipts This Page (optional) .	1		3750.00
卜	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and addr	not be sold or used by any personess of any political committee to	
American Health Care Association Pol	litical Action (	Committee	
Full Name (Last, First, Middle Initial) Lyn Bentley			Date of Receipt
Mailing Address 1201 L Street NW			07 21 2009
City	State	Zip Code	Transaction ID: C759408
Washington	DC	20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer AHCA	Occupation Director		
Receipt For:  Primary General  Other (appeits)	Aggregate `	Year-to-Date ▼ 320.00	1
Other (specify) ▼  Full Name (Last, First, Middle Initial)	0 0		1
Lyn Bentley			Date of Receipt
Mailing Address 1201 L Street NW			07 24 2009
City	State	Zip Code	Transaction ID: C760378
Washington	DC	20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer AHCA	Occupation Director		
Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 320.00	]
Full Name (Last, First, Middle Initial) William Biggs	<u> </u>		Date of Receipt
Mailing Address 101 Grace Street			07 23 7 2009
City	State	Zip Code	Transaction ID: C761171
Easley	SC	29640	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1250.00
Name of Employer Health Management Resourc- es	Occupation Executive		
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 3750.00	]
SUBTOTAL of Receipts This Page (optional)		)	1290.00

Any information co			for each category of the Detailed Summary Page	(check only one)    X   11a
NAME OF COI	pied from such Reports and S ourposes, other than using the MMITTEE (In Full) ealth Care Association Po	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Jim Birchem	t, First, Middle Initial) s 920 4th Street, SE			Date of Receipt  0 7 1 7 2 0 0 9
City Little Falls		State MN	Zip Code 56345	Transaction ID: C759703  Amount of Each Receipt this Period
FEC ID numbe federal political	r of contributing committee.	C		500.00
Name of Emplored Eldercare of M  Receipt For: Primary Other (sp	General	Occupatio Presiden Aggregate		
Full Name (Las Orlando Jr Bisba Mailing Addres	•			Date of Receipt  0 7 3 1 2 0 0 9
City		State	Zip Code	Transaction ID: C762879
Riverside FEC ID numbe federal political	r of contributing committee.	C	02915	Amount of Each Receipt this Period  87.50
Name of Emplo Orchard View I	yer Manor	Occupatio Administ		
Receipt For: Primary Other (sp	General ecify) ▼	Aggregate	e Year-to-Date ▼ 262.50	
Full Name (Las	t, First, Middle Initial)			Date of Receipt
Mailing Addres	s 6937 Warfield Avenue	•		07 22 2009
City Sykesville		State MD	Zip Code 21784	Transaction ID: C761017  Amount of Each Receipt this Period
	r of contributing committee.	C	21704	1250.00
Name of Emplo Nexion Health	oyer Care	Occupatio CFO	n	7
Receipt For: Primary Other (sp	General ecify) ▼	Aggregate	Year-to-Date ▼ 3750.00	
SUBTOTAL of R	eceipts This Page (optional)	1	<b>)</b>	1837.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the (Check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Po	name and address of any political co	rany person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lane Bowen  Mailing Address 680 South Fourth Stree  City Louisville  FEC ID number of contributing federal political committee.  Name of Employer Kindred Healthcare  Receipt For:  Primary General	State Zip Code KY 40202  C  Occupation EVP & President, Health Ser Aggregate Year-to-Date ▼	Date of Receipt    M M M   D D D   27   2009   Transaction ID: C761411   Amount of Each Receipt this Period    vices Divis   0.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) Timothy J Boyle  Mailing Address 4412 Applewood Aven  City Sioux City  FEC ID number of contributing federal political committee.  Name of Employer Care Center Mgmt Co  Receipt For:		
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Al Braswell Mailing Address 3674 Pacific Avenue  City Riverside  FEC ID number of contributing federal political committee.  Name of Employer Vista Pacifica Enterprises	State Zip Code CA 92509  C Occupation Owner	Date of Receipt  O 7 O 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 250	5000.00

SCHEDULE A (I	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 58 (check only one)    X
NAME OF COMMITT	EE (In Full)		on for the purpose of soliciting contributions o solicit contributions from such committee.
American Health C	Care Association Political Act	on Committee	
Ruth Brown  Mailing Address PC			Date of Receipt
City	State	•	07 17 2009  Transaction ID: C753779
<u>Bogata</u>	TX	75417-0016	Amount of Each Receipt this Period
FEC ID number of confederal political comm			500.00
Name of Employer Information Requeste	Occup Inform	ation nation Requested	
Receipt For: Primary Other (specify)	General	gate Year-to-Date ▼ 500.00	
Full Name (Last, First Christopher R. Bryson	, 		Date of Receipt
	26 Jeurgens Court	7.0	07 31 2009
City	State	'	Transaction ID: C762880
Norcross  FEC ID number of confederal political comm		30096	Amount of Each Receipt this Period  125.00
Name of Employer UHS-Pruitt Corporation	Occup Chief	ation Operating Officer	
Receipt For: Primary Other (specify)	General	gate Year-to-Date ▼ 375.00	
Full Name (Last, First Les Burns	Middle Initial)		Date of Receipt
	echnut Manor 777 Beechnut Street		07 08 YYYYY
City <u>Houston</u>	State TX	Zip Code 77072	Transaction ID: C748391  Amount of Each Receipt this Period
FEC ID number of col federal political comm	ntributing ttee.		500.00
Name of Employer Beechnut Manor	Occup Admir	ation nistrator	
Receipt For: Primary Other (specify)	General	gate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts	This Page (optional)		1125.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 58 (check only one)    X
A o	ny information copied from such Reports and strong commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Po	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)  Douglas Burr  Mailing Address 1185 Wilde Run Cour	t		Date of Receipt  0 7
	City	State	Zip Code	Transaction ID: C762881
	Roswell FEC ID number of contributing federal political committee.	GA C	30075	Amount of Each Receipt this Period  250.00
	Name of Employer Cypress Administrative Services, LLC Receipt For:  Primary General Other (specify) ▼	Occupation VP Finar Aggregate		]
	Full Name (Last, First, Middle Initial) Calvin Callaway Mailing Address 510 Mill St			Date of Receipt  0 7 2 2 2 0 0 9
	City	State	Zip Code	Transaction ID: C759696
	<u>Folsom</u>	CA	95630-2607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Folsom Convalescent Hospi- tal	Occupation Administ		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Gregory Chambery			Date of Receipt
	Mailing Address 100 Daniel Drive			07 06 YYYYY 02009
	City	State	Zip Code	Transaction ID: C747023
	Webster	NY	14580-2912	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Maplewood Nursing Home	Occupation Administ		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1400.00	
	SUBTOTAL of Receipts This Page (optional) .			1050.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Po	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠ <b>.</b> .	Full Name (Last, First, Middle Initial) Steven E. Chies			Date of Receipt
	Mailing Address 8624 Mississippi Blvd		7:- 0-4-	07 31 2000
	City Coon Rapids	State MN	Zip Code 55433-5968	Transaction ID: C762883  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33403 3300	1250.00
	Name of Employer Benedictine Health System- Cambridge Receipt For:  Primary General  Other (specify) ▼	<del>, ' ` `</del>	on g Term Care Services e Year-to-Date ▼ 3750.00	
3.	Full Name (Last, First, Middle Initial) Robert M. Chur Mailing Address Elderwood Senior Care	e		Date of Receipt
	7 Limestone Drive	01-1-	7'- 0-4-	07 17 2009
	City Williamsville	State NY	Zip Code 14221-7051	Transaction ID: C759708  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	142217001	1250.00
	Name of Employer Elderwood Affiliates Inc	Occupation Presiden		
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 3750.00	
_	Full Name (Last, First, Middle Initial) Kathleen Collins Pagels	1		Date of Receipt
	Mailing Address 1440 East Missouri St Suite C-102	reet		07 31 2009
	City	State	Zip Code	Transaction ID: C762891
	Phoenix  FEC ID number of contributing federal political committee.	AZ C	85014	Amount of Each Receipt this Period  125.00
	Name of Employer Arizona Health Care Assoc- iation	Occupation Executiv	n e Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 475.00	
	SUBTOTAL of Receipts This Page (optional)	1		2625.00
	TOTAL This Period (last page this line number	only)		

Mailing Address 200 Dryden Road Suite 2000  City Dresher PA 19025  FEC ID number of contributing federal political committee.  Name of Employer Complete Healthcare Resources Receipt For: Primary General Other (specify) ▼ State Zip Code Dresher Post Aggregate Year-to-Date ▼  City State Zip Code Transaction ID: C761182  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Transaction ID: C761182  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: C761182  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: C76182  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: C747098  Transaction ID: C747098  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: C747098  Amount of Each Receipt this Period  Transaction ID: C747098  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Nexion Health, Inc.  Administration  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)		SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and Sta	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any personal schedule s	FOR LINE NUMBER: PAGE 16 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
A. Michael D Arcangelo Mailing Address 200 Dryden Road Suite 2000 City State Zip Code PA 19025 FEC ID number of contributing federal political committee.  Name of Employer Complete Health and Suite 2000  City State Zip Code PA 19025  Receipt For: Primary General Other (specify) ▼ State Zip Code TX 77657-7356  FEC ID number of contributing federal political committee.  B. James Davidson Mailing Address 705 N Main St City State Zip Code TX 77657-7356  FEC D number of contributing federal political committee.  Name of Employer Nexion Health, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) Judith Dicker Mailing Address 18215 Hillside Avenue  City State Zip Code Administration Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) Judith Dicker Mailing Address 18215 Hillside Avenue  City Jamaica NY 11432 FEC ID number of contributing federal political committee.  Name of Employer Receipt For: State Zip Code Administration Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) Judith Dicker Mailing Address 18215 Hillside Avenue  City Jamaica NY 11432 FEC ID number of contributing federal political committee.  Name of Employer Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Amo		NAME OF COMMITTEE (In Full)			solicit contributions from such committee.
Suite 2000  City	Δ.	Michael D'Arcangelo			<del>-</del>
City Dresher PA 19025  PEC ID number of contributing federal political committee.  Name of Employer Complete Healthcare Resoutions Receipt For Primary General Other (specify) ▼  Pul Name (Last, First, Middle Initial)  James Davidson  Mailing Address 705 N Main St  City State Zip Code Transaction ID: C747098  Amount of Each Receipt His Period  TX 77657-7356  FEC ID number of contributing federal political committee.  City State Zip Code Transaction ID: C747098  Amount of Each Receipt His Period  City State Zip Code Transaction ID: C747098  Amount of Each Receipt His Period  City State Zip Code Transaction ID: C747098  Amount of Each Receipt His Period  City State Zip Code Transaction ID: C750609  City State Zip Code Transaction ID: C759609  City State Zip Code Transaction ID: C759609  Aggregate Year-to-Date ▼  Transaction ID: C7579609  Amount of Each Receipt His Period  City State Zip Code Transaction ID: C759609  Amount of Each Receipt His Period  City State Zip Code Transaction ID: C759609  Amount of Each Receipt His Period  Aggregate Year-to-Date ▼  Transaction ID: C7579609  Amount of Each Receipt His Period  Aggregate Year-to-Date ▼  Transaction ID: C7579609  Amount of Each Receipt His Period  Aggregate Year-to-Date ▼  Primary General Occupation  Executive Director  Receipt For: Aggregate Year-to-Date ▼  Primary General Occupation  Executive Director  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Primary General Occupation  Executive Director  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼					07 23 2009
Receipt For:		City		Zip Code	Transaction ID: C761182
Name of Employer Complete Healthcare Resourons Fecipi For:		Dresher	<u>PA</u>	19025	Amount of Each Receipt this Period
Receipt For:			С		1250.00
Primary					
Mailing Address 705 N Main St  City State Zip Code Transaction ID: C747098  Lumberton TX 77657-7356  FEC ID number of contributing federal political committee.  Name of Employer Mailing Address 18215 Hillside Avenue  City State Zip Code Transaction ID: C747098  Amount of Each Receipt this Period  Food on the Each Receipt Signature of Employer Mexion Health, Inc.  Administration  Receipt For: Aggregate Year-to-Date ✓  City State Zip Code NY 11432  FEC ID number of contributing federal political committee.  Name of Employer Hillside Manor  Receipt For: Aggregate Year-to-Date ✓  Cocupation NY 11432  FEC ID number of contributing federal political committee.  Name of Employer Hillside Manor  Receipt For: Aggregate Year-to-Date ✓  Occupation Executive Director  Aggregate Year-to-Date ✓  Aggregate Year-to-Date ✓  Other (specify) ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼		Primary General	Aggregate	3750.00	
Mailing Address 705 N Main St	- B.				Date of Receipt
Lumberton  TX 77657-7356  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Nexion Health, inc.  Receipt For:    Date of Receipt   Primary   Canaration					M ' M / D ' D / Y ' Y ' Y ' Y
FEC ID number of contributing federal political committee.  Name of Employer Nexion Health, Inc.  Receipt For:  Primary General Other (specify) ▼  C.  Full Name (Last, First, Middle Initial) Judith Dicker  Mailing Address 18215 Hillside Avenue  City State Zip Code NY 11432  FEC ID number of contributing federal political committee.  Name of Employer Hillside Manor  Receipt For:  Primary General Occupation  Executive Director  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼		City	State	Zip Code	Transaction ID: C747098
Name of Employer   Nexion Health, Inc.   Administration		Lumberton	TX	77657-7356	Amount of Each Receipt this Period
Nexion Healfh, Inc.  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  600.00   C. Juli Name (Last, First, Middle Initial) Judith Dicker  Mailing Address 18215 Hillside Avenue  City State Zip Code NY 11432  FEC ID number of contributing federal political committee.  Name of Employer Hillside Manor  Receipt For:  Primary General Other (specify) ▼  Administration  Aggregate Year-to-Date ▼  3750.00			С		550.00
Primary General Other (specify) ▼ 600.00  Full Name (Last, First, Middle Initial) Judith Dicker  Mailing Address 18215 Hillside Avenue  City State Zip Code NY 11432  FEC ID number of contributing federal political committee.  Name of Employer Hillside Manor  Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3750.00		Name of Employer Nexion Health, Inc.			
C. Judith Dicker  Mailing Address 18215 Hillside Avenue  City State Zip Code  Jamaica NY 11432  FEC ID number of contributing federal political committee.  Name of Employer Hillside Manor  Receipt To Date of Receipt  M M M D D D D D D D D D D D D D D D D		Primary General	Aggregate	1 1 1 1 1 1 1	
City  Jamaica  FEC ID number of contributing federal political committee.  Name of Employer Hillside Manor  Receipt For:  Primary  Other (specify) ▼  State Zip Code NY 11432  Amount of Each Receipt this Period  1250.00  C  Transaction ID: C759699  Amount of Each Receipt this Period  1250.00	- С.	,			Date of Receipt
Jamaica  NY 11432  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Hillside Manor  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  3750.00		Mailing Address 18215 Hillside Avenue			
FEC ID number of contributing federal political committee.  Name of Employer Hillside Manor  Receipt For: Primary General Other (specify)  Other (specify)  3750.00				•	
Name of Employer Hillside Manor  Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date  3750.00		•	INY	11432	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify)			C		1250.00
Primary General Other (specify)   3750.00					
SUBTOTAL of Receipts This Page (optional)		Primary General	Aggregate		
		SUBTOTAL of Receipts This Page (optional)			3050.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 58 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American Health Care Association	and Statements may not be sold or used by any persong the name and address of any political committee to a Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Stanley Dicker  Mailing Address 18215 Hillside Ave  City  Jamaica  FEC ID number of contributing federal political committee.  Name of Employer Hillside Manor Rehab Ctr  Receipt For: Primary General Other (specify)	State Zip Code NY 11432  C  Occupation Executive Director  Aggregate Year-to-Date  3750.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Joseph Donchess  Mailing Address Louisiana Nursing 7844 Office Park E  City Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Nursing Home Association Receipt For: Primary General Other (specify)	Home Association	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Joseph Donchess  Mailing Address  Louisiana Nursing 7844 Office Park E  City  Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Nursing Home Association  Receipt For:  Primary  General  Other (specify)	Home Association  Soulevard  State Zip Code  LA 70809-7603  C  Occupation  Executive Director  Aggregate Year-to-Date   1700.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	al)	2700.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 58 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	 y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Health Care Association I	Political Action	Committee	
Full Name (Last, First, Middle Initial) William Dunn			Date of Receipt
Mailing Address 870 Bexley Ave			07 06 7 2009
City	State	Zip Code	Transaction ID: C747100
<u>Marion</u>	OH	43302-5463	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Marion Manor Nursing Hm Inc	Occupatio Administ		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		375.00	
Full Name (Last, First, Middle Initial) Floyd Eaton			Date of Receipt
Mailing Address 3715 SW 29th St Ste 200			07 17 2009
City	State	Zip Code	Transaction ID: C754459
<u>Topeka</u>	KS	66614-2164	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5000.00
Name of Employer Midwest Health Services Inc	Occupatio Informati	n ion Requested	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Jon-Patrick Ewing			Date of Receipt
Mailing Address 1201 L Street, NW			07 21 2009
City	State	Zip Code	Transaction ID: C759409
Washington	DC	20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Information Requested	Occupatio Informati	n ion Requested	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		300.00	
			5400.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page and Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 19 / 58 (check only one)    X
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)  American Health Care Association	g the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Teresa Eyet		Date of Receipt
Mailing Address 1201 L Street NW		07 21 YYYY 2009
City	State Zip Code	Transaction ID: C759410
Washington  FEC ID number of contributing federal political committee.	DC 20001	Amount of Each Receipt this Period  20.00
Name of Employer AHCA	Occupation Education	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) Teresa Eyet		Date of Receipt
Mailing Address 1201 L Street NW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20001	Transaction ID: C760379  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer AHCA	Occupation Education	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) Susan Feeney		Date of Receipt
Mailing Address 7005 Metropolitan	PI	07 21 2009
City Falls Church	State Zip Code VA 22043-2330	Transaction ID: C759411  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.24
Name of Employer American Health Care Asso- ciation	Occupation Vice President, Public Affairs	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 307.60	
SUBTOTAL of Receipts This Page (option	al)	59.24

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 58 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Health Care Association	the name and add	dress of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Susan Feeney Mailing Address 7005 Metropolitan F	PI State	7:n Code	Date of Receipt  0 7 2 4 2 0 0 9
Falls Church  FEC ID number of contributing federal political committee.	VA C	Zip Code 22043-2330	Transaction ID: C760380  Amount of Each Receipt this Period  19.24
Name of Employer American Health Care Association Receipt For:  Primary General  Other (specify) ▼	<del></del>	n sident, Public Affairs Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Phillip Fogg, Jr.  Mailing Address 4560 SE Internation Suite 100	<u> </u>		Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Milwaukie  FEC ID number of contributing federal political committee.	State OR	Zip Code 97222	Transaction ID: C761169  Amount of Each Receipt this Period  5000.00
Name of Employer Marquis Companies, Inc.  Receipt For:  Primary General  Other (specify) ▼	Occupation CEO Aggregate	Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Frances Foy Mailing Address 154 Fourth Street			Date of Receipt
City Fillmore FEC ID number of contributing federal political committee.	State CA	Zip Code 93015	Transaction ID: C749712  Amount of Each Receipt this Period  300.00
Name of Employer SunBridge Healthcare  Receipt For:  Primary General Other (specify) ▼		on Vice President of Operations  Year-to-Date ▼  300.00	S
SUBTOTAL of Receipts This Page (optional	ત્રી)		5319.24

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 58 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Pole	name and ad	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Patricia Giorgio  Mailing Address Evergreen Estates 3410 12th Avenue SW  City Cedar Rapids  FEC ID number of contributing federal political committee.	State IA	Zip Code 52404-1307	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Evergreen Estates  Receipt For:  Primary General  Other (specify) ▼	Occupatio Owner Aggregate	n e Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) James Gomez Mailing Address 2201 K Street  City Sacramento  FEC ID number of contributing federal political committee.  Name of Employer CA Association of Health Facilities Receipt For: Primary General Other (specify)	State CA C Occupatio Presiden Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y  O 7 3 1 2 0 0 9  Transaction ID: C762885  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Howard Groff Mailing Address 9031 Penn Avenue S  City Bloomington  FEC ID number of contributing federal political committee.  Name of Employer Tealwood Care Centers Inc  Receipt For: Primary General Other (specify)	State MN  C  Occupatio Presiden  Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			3750.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 58 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any personante name and address of any political committee to	on for the purpose of soliciting contributions
American Health Care Association	Political Action Committee	
Full Name (Last, First, Middle Initial) Gerald Hamilton		Date of Receipt
Mailing Address 7612 Rio Penasco	Court NW	07 20 7 2009
City	State Zip Code	Transaction ID: C755013
Albuquerque	NM 87120-5315	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bee Hive Homes of Albuque-	Occupation Information Requested	
rque Receipt For:	Aggregate Year-to-Date ▼	$\dashv$
Primary General	600.00	1
Other (specify)		
Full Name (Last, First, Middle Initial) David Hebert		Date of Receipt
Mailing Address 7605 Ridgecrest Dr	rive	07 21 2009
City	State Zip Code	Transaction ID: C759414
Alexandria	VA 22308-1049	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.47
Name of Employer AHCA	Occupation Senior Vice President of Advocacy	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 615.51	
Full Name (Last, First, Middle Initial) David Hebert		Date of Receipt
Mailing Address 7605 Ridgecrest Dr	rive	07 24 2009
City	State Zip Code	Transaction ID: C760383
Alexandria	VA 22308-1049	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.47
Name of Employer AHCA	Occupation Senior Vice President of Advocacy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	615.51	]

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Health Care Association	nd Statements may not be sold or used by any person the name and address of any political committee to Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Dave Helmsin  Mailing Address 1717   St		Date of Receipt  0 7 0 8 2 0 0 9
City Sacramento FEC ID number of contributing	State Zip Code CA 95811-3001	Transaction ID: C750573  Amount of Each Receipt this Period  500.00
Receipt For:  Primary  Other (specify)	Occupation Partner  Aggregate Year-to-Date   500.00	_
Full Name (Last, First, Middle Initial) Richard Herrick  Mailing Address 33 Elk Street 300  City Albany  FEC ID number of contributing federal political committee.  Name of Employer NYS Health Facilities Association Receipt For: Primary General Other (specify)	State Zip Code NY 12207  C  Occupation President  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jeanne C. Jaeckels  Mailing Address 12120 - 24th Street  City Clear Lake  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General	State Zip Code MN 55319  C  Occupation Information Requested Aggregate Year-to-Date	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional	250.00	900.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Page	le Check of hy offe)
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Health Care Association F		ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Jim Klausman  Mailing Address 3715 SW 29th Stree Suite 200  City  Topeka  FEC ID number of contributing federal political committee.  Name of Employer Midwest Health Management  Receipt For:  Primary General Other (specify)	State Zip Code KS 66614-2164  C  Occupation President  Aggregate Year-to-Date   5000.	Date of Receipt  O 7 17 2009  Transaction ID: C754457  Amount of Each Receipt this Period  5000.00
Full Name (Last, First, Middle Initial) David Kyllo  Mailing Address 4621 28th Road Sou  City Arlington  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For: Primary General Other (specify)	State Zip Code VA 22206  C  Occupation Director, Assisted Living Aggregate Year-to-Date  632.	Date of Receipt  M M / D D / Y Y Y Y Y  O 7 21 2009  Transaction ID: C759415  Amount of Each Receipt this Period  39.56
Full Name (Last, First, Middle Initial) David Kyllo Mailing Address 4621 28th Road Sou  City Arlington  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For: Primary General Other (specify)	State Zip Code VA 22206  C  Occupation Director, Assisted Living Aggregate Year-to-Date  632.	Date of Receipt  M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional  TOTAL This Period (last page this line numb		

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than	orts and Statements may not be sold or used by any perso using the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Associ	ation Political Action Committee	
Full Name (Last, First, Middle Initial A. Kathleen A Langford		Date of Receipt
Mailing Address 1045 Sandrett	o Drive	07 27 2009
City	State Zip Code	Transaction ID: C761400
Prescott	AZ 86305	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.50
Name of Employer Mountain View Manor	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	
Full Name (Last, First, Middle Initial B. Cynthia Leach		Date of Receipt
Mailing Address 4943 East Eva	ans Drive	07 24 2009
City	State Zip Code	Transaction ID: C760351
Scottsdale	AZ 85254-2824	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1.00
Name of Employer CopperSands Inc.	Occupation VP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	
Full Name (Last, First, Middle Initial Peter J. Licari		Date of Receipt
Mailing Address 200 Dryden R Suite 2000	oad	07 D D / Y Y Y Y Y Y Y 2009
City <u>Dresher</u>	State Zip Code PA 19025	Transaction ID: C761399  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Complete Healthcare Resou- rces	Occupation President/ Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
SUBTOTAL of Receipts This Page (o	optional)	1301.50

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 58 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Health Care Association	nd Statements may not be sold or used by any personal the name and address of any political committee to Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Howard Lipschutz Mailing Address 1304 Laurel Oak Ro	State Zip Code	Date of Receipt  0 7 3 1 2 0 0 9  Transaction ID: C762973
Voorhees  FEC ID number of contributing federal political committee.	NJ 08043-4310	Amount of Each Receipt this Period  125.00
Name of Employer Burnt Tavern Rehabilation HealthCare Receipt For:  Primary  General  Other (specify) ▼	Occupation Vice President  Aggregate Year-to-Date   1375.00	
Full Name (Last, First, Middle Initial) Todd Mackenzie  Mailing Address 555 Round Rock W #390	lest	Date of Receipt  0 7 3 1 2 0 0 9
City Round Rock	State Zip Code TX 78681	Transaction ID: C762886
FEC ID number of contributing federal political committee.	C 70001	Amount of Each Receipt this Period  75.00
Name of Employer Remington Medical Resort of San Antoni Receipt For:  Primary General Other (specify) ▼	Occupation Chief Executive Officer  Aggregate Year-to-Date   225.00	
Full Name (Last, First, Middle Initial) Michael McBride		Date of Receipt
Mailing Address 101 Grace Dr		07 31 2009
City Easley	State Zip Code SC 29640-9088	Transaction ID: C762887  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Health Management Resourc- es	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
SUBTOTAL of Receipts This Page (optional	J)	1450.00

SCHEDULE A (FI	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purpose  NAME OF COMMITT	es, other than using the name and a	ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Michael Meillier Mailing Address 27  City Faribault  FEC ID number of corfederal political comminum Name of Employer Pleasant Manor Inc	Brand Ave  State MN  htributing ttee.  Occupat Social S	Services Dir	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify)	General	te Year-to-Date ▼ 225.00	
	10 Gillespie Ways ite 212  State CA  ntributing itee.  C  Occupat Consult	tant te Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Gregory Miller Mailing Address 94.  City Cincinnati FEC ID number of cor	, Middle Initial) 41 Bainwoods Dr  State OH	Zip Code 45249-3602	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer HCMG  Receipt For: Primary Other (specify)	Occupat NHA Aggrega	ion te Year-to-Date ▼	375.00
SUBTOTAL of Receipts	This Page (optional)		950.00

SCHEDULE A (FEC Form : ITEMIZED RECEIPTS  Any information copied from such Reports	Use separate schedule(s) for each category of the Detailed Summary Page  and Statements may not be sold or used by any persong the name and address of any political committee to	FOR LINE NUMBER: PAGE 28 / 58  (check only one)  X 11a 11b 11c 12  13 14 15 16 17  Son for the purpose of soliciting contributions to colicit contributions
NAME OF COMMITTEE (In Full)  American Health Care Association		o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) V. Richard Miller Mailing Address 3594 East US Hi	ghway 30	Date of Receipt
City	State Zip Code	0 7 3 1 2 0 0 9  Transaction ID: C762889
Warsaw	IN 46580-6720	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer MMM Invest Inc	Occupation CEO/CFO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) Cynthia Klisz Morton		Date of Receipt
Mailing Address 4609 Overbrook		07 21 2009
City	State Zip Code	Transaction ID: C759416
Bethesda  FEC ID number of contributing federal political committee.	MD 20816	Amount of Each Receipt this Period  19.24
Name of Employer American Health Care Asso- ciation	Occupation Government Affairs	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 321.70	
Full Name (Last, First, Middle Initial) Cynthia Klisz Morton		Date of Receipt
Mailing Address 4609 Overbrook	Road	07 24 2009
City Bethesda	State Zip Code MD 20816	Transaction ID: C760657  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.24
Name of Employer American Health Care Asso- ciation	Occupation Government Affairs	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 321.70	
SUBTOTAL of Receipts This Page (option	onal)	1288.48

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 58 (check only one)    X
or for com	nation copied from such Reports and S mercial purposes, other than using the OF COMMITTEE (In Full) can Health Care Association Pol	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	me (Last, First, Middle Initial)			Date of Receipt
	Address 415 Rogers Avenue			0 7 1 7 2 0 0 9
City		State	Zip Code	Transaction ID: C759702
	mith  number of contributing political committee.	AR C	72901-1903	Amount of Each Receipt this Period  1250.00
Name of Central Centers		Occupatio Owner Aggregate	n e Year-to-Date ▼	
	rimary General  Other (specify) ▼		3750.00	
Timothy	me (Last, First, Middle Initial) r F Nicholson Address 304 Gilbert Road	ı		Date of Receipt
City		State	Zip Code	07 20 2009
<u>Dillsb</u> ı	urg	PA	17019-9511	Transaction ID: C760172  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C		2500.00
Name o Lyric H	of Employer ealth Care	Occupatio Presiden		
	t For:  rimary General  other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
	me (Last, First, Middle Initial) sca Fierro O'Reilly	<u> </u>		Date of Receipt
Mailing	Address 4005 Nellie Custis Dr			07 21 YYYY 2009
City		State	Zip Code	Transaction ID: C759417
	ton  number of contributing political committee.	C	22207-5107	Amount of Each Receipt this Period 20.00
<u>onal Af</u>			n Health Care Association	
	t For: Irimary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 320.00	
SUBTOT	<b>AL</b> of Receipts This Page (optional)	ı		3770.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Po	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ <b>x</b> .	Full Name (Last, First, Middle Initial) Francesca Fierro O'Reilly Mailing Address 4005 Nellie Custis Dr City		Zip Code	Date of Receipt  0 7 2 4 2 0 0 9
	Arlington  FEC ID number of contributing federal political committee.	VA C	22207-5107	Transaction ID: C760658  Amount of Each Receipt this Period  20.00
	Name of Employer Sr. Director of Congressional Affairs Receipt For:  Primary General Other (specify) ▼		n n Health Care Association e Year-to-Date ▼ 320.00	]
 3.	Full Name (Last, First, Middle Initial) Tony E Oglesby Mailing Address PO Box 350			Date of Receipt  0 7 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: C762890
	Benton	TN	37307-0350	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1250.00
	Name of Employer SavaSenior Care	Occupatio Presiden		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3750.00	
_	Full Name (Last, First, Middle Initial) Delbert Ousley			Date of Receipt
	Mailing Address 300 Provider Court			07 27 YYYY 2009
	City	State	Zip Code	Transaction ID: C761015
	Richmond  FEC ID number of contributing federal political committee.	C	40475-8488	Amount of Each Receipt this Period  750.00
	Name of Employer PMD Corporation	Occupatio Presiden		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)	1		2020.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 58 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American Health Care Associatio	and Statements may not be sold or used by any pers ng the name and address of any political committee to n Political Action Committee	
Full Name (Last, First, Middle Initial) Jeffrey Parrish Mailing Address 11156 Sardis-Sco		Date of Receipt  0 7 1 7 2 0 0 9
City Scotts Hill FEC ID number of contributing	State Zip Code TN 38374	Transaction ID: C759704  Amount of Each Receipt this Period
federal political committee.  Name of Employer Tennessee Health Management Receipt For:  Primary General Other (specify) ▼	Occupation General Counsel  Aggregate Year-to-Date   375.00	125.00
Full Name (Last, First, Middle Initial) Charles Perry  Mailing Address Nevada Health Ca 4550 West Oakey		Date of Receipt  0 7 3 1 2 0 0 9
City	State Zip Code	Transaction ID: C762893
Las Vegas	NV 89102-1599	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Nevada Health Care Assn.	Occupation Executive Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) Russell V Peterson		Date of Receipt
Mailing Address 5281 Ventura Dr		07 29 2009
City	State Zip Code NE 68025-9779	Transaction ID: C762958
Fremont  FEC ID number of contributing federal political committee.	NE 68025-9779	Amount of Each Receipt this Period  375.00
Name of Employer Nye Senior Living	Occupation Regional Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of Receipts This Page (entic	nal)	1750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the  Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 58 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	o solicit contributions from such committee.
American Health Care Association P	olitical Action Committee	
Full Name (Last, First, Middle Initial) Teddy Rae Price		Date of Receipt
Mailing Address PO Box 1438		07
City	State Zip Code	Transaction ID: C763098
Winnfield	LA 71483-1438	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer Central Management Company	Occupation President & CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Neil L. Pruitt, Jr.		Date of Receipt
Mailing Address UHS-Pruitt Corporati 1626 Jeurgens Court		0 7 3 1 2 0 0 9
City	State Zip Code	Transaction ID: C762894
Norcross	GA 30093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer UHS-Pruitt Corporation, Inc.	Occupation President & CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) Thomas G. Rau		Date of Receipt
Mailing Address Nexcare Health Syste PO Box 2215	ems, Inc.	07 24 2009
City	State Zip Code	Transaction ID: C760155
Brighton	MI 48116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Nexcare Health Systems, Inc.	Occupation Owner	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	3750.00	
	1	

	SCHEDULE A (FEC Form 3X)		Lloo congrete ashedula(s)	FOR LINE NUMBER: PAGE 33 / 58
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
	II LIVIIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12
Г	Any information period from purely Deposits and Ct	otomont- :	y not be cold or used by service	13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	solicit contributions from such committee.
ľ	NAME OF COMMITTEE (In Full)			
	American Health Care Association Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mark Reagan			Date of Receipt
	Mailing Address 1508 Landmark Drive			07 17 2009
	City	State	Zip Code	Transaction ID: C752538
	Vallejo	CA	94591	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Hooper, Lundy & Bookman	Occupation Attorney		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	'''	250.00	1
	Other (specify) ▼	0 0	1 1 1 1 1 1 1	
В.	Full Name (Last, First, Middle Initial) Robert Rector			Date of Receipt
	Mailing Address 4037 Overlook Trail Dri	ve		07 24 2009
	City	State	Zip Code	Transaction ID: C760142
	Roanoke	VA	24018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Richfield Retirement Comm-	Occupation		7
	unity	Chief Op	perating Officer	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		700.00	
С.	Full Name (Last, First, Middle Initial) Emmett Riner			Date of Receipt
	Mailing Address PO Box 391			07 06 2009
	City	State	Zip Code	Transaction ID: C747101
	Naples	TX	75568	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer New Boston Health Care Ce- nter	Occupation Informat	on ion Requested	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General		500.00	1
	Other (specify) ▼	0 0		1
	SUBTOTAL of Receipts This Page (optional)			1250.00
	and ago (optional)			

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 58 (check only one)    X
S C	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Health Care Association P	ne name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Candi Rogers			Date of Receipt
-	Mailing Address Gonzales Healthcare 905 West Carnuvia F			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: C748390
	Gonzales	LA	70737	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Information Requested	Occupatio Informati	n ion Requested	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Frank Romano  Mailing Address 57 Summer Street			Date of Receipt
	Mailing Address 57 Summer Street			07 31 2009
	City	State	Zip Code	Transaction ID: C762895
	Rowley	MA	01969-1835	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1250.00
	Name of Employer Essex Group	Occupatio CEO	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 3750.00	
. –	Full Name (Last, First, Middle Initial) Leonard Russ			Date of Receipt
	Mailing Address 40 Keogh Lane			07 31 2009
	City	State	Zip Code	Transaction ID: C762896
	New Rochelle  FEC ID number of contributing federal political committee.	C	10805-1308	Amount of Each Receipt this Period  1250.00
	Name of Employer Bayberry Nursing Home	Occupatio Administ		
	Receipt For:  Primary General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 3250.00	
	SUBTOTAL of Receipts This Page (optional)		<b>1</b>	3000.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
0	any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Health Care Association Pol	litical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Jesse Samples			Date of Receipt
	Mailing Address 110 Association Dr	Ctata	7:n Code	07 31 2009
	City Charleston	State WV	Zip Code 25311-1217	Transaction ID: C762898  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer West Virginia Health Care Association	Occupatio CEO	n	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
— В.	Full Name (Last, First, Middle Initial) Lee Samson			Date of Receipt
	Mailing Address 9200 Sunset Boulevard Suite 1100	d		07 / 31 / 2009
	City	State	Zip Code	Transaction ID: C762897
	West Hollywood  FEC ID number of contributing federal political committee.	CA	90069	Amount of Each Receipt this Period  1250.00
	Name of Employer SNF Management/ Windsor	Occupatio Presiden		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 3750.00	
 C.	Full Name (Last, First, Middle Initial) Michael Scharfenberger			Date of Receipt
	Mailing Address 7265 Kenwood Road Suite 300			07 23 2009
	City	State	Zip Code	Transaction ID: C761172
	Cincinnati  FEC ID number of contributing federal political committee.	OH C	45236-4414	Amount of Each Receipt this Period  125.00
	Name of Employer Nursing Care Management	Occupatio Exec Vic	n e President	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)			1625.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 58 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			13 14 15 16 1 16 1 17 1 18 1 19 1 19 1 19 1 19 1 19 1 19
American Health Care Association Pol	itical Action	Committee	
Full Name (Last, First, Middle Initial) Floyd Schlossberg			Date of Receipt
Mailing Address 4200 W Peterson Ave Ste 140			07 15 2009
City	State	Zip Code	Transaction ID: C755017
Chicago	<u> </u>	60646-6819	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1250.00
Name of Employer Alden Management Inc	Occupatio Presiden		
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	33 19 11	3750.00	
Full Name (Last, First, Middle Initial) Ina Schlossberg			Date of Receipt
Mailing Address 4200 W Peterson Ave Ste 140			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C755016
Chicago	IL	60646-6819	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1250.00
Name of Employer Alden Enterprises	Occupatio Special (	n Operations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) Jerry Schroer, Jr.			Date of Receipt
Mailing Address 1608 Muirfield NW			07 20 7 2009
City	State	Zip Code	Transaction ID: C760171
Canton	OH	44708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Altercare	Occupatio Executive		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		1500.00	
SUBTOTAL of Receipts This Page (optional)			3500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37/58   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
American Health Care Association	Political Action	Committee	
Full Name (Last, First, Middle Initial) Shawn Scott			Date of Receipt
Mailing Address Medline Industries One Medline Place			07 / 31 / 2009
City Mundelein	State IL	Zip Code 60060	Transaction ID: C762900  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Medline Industries	Occupatio VP, Heal	n thcare Corporate	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Louis Serra			Date of Receipt
Mailing Address 2525 Pennsylvania	Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Weirton	State WV	Zip Code	Transaction ID: C760176
FEC ID number of contributing federal political committee.	C	26062-3634	Amount of Each Receipt this Period 500.00
Name of Employer Weirton Geriatric Center	Occupatio Owner/A	n dministrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Robert Siebel			Date of Receipt
Mailing Address 13185 W Great Mo	untain Drive		07 31 2009
City Lakewood	State CO	Zip Code 80228-3512	Transaction ID: C762901
FEC ID number of contributing federal political committee.	C	00220-3312	Amount of Each Receipt this Period 500.00
Name of Employer Carriage Healthcare Compa- nies, Inc.	Occupatio Presiden	t	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	
SUBTOTAL of Receipts This Page (optional	J)		1075.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Health Care Association			
Full Name (Last, First, Middle Initial) Todd Smith			Date of Receipt
Mailing Address 5902 Carlton Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bethesda	State MD	Zip Code 20816-2308	Transaction ID: C762876  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20010 2000	300.00
Name of Employer AHCA	Occupation Lobbyist	n	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Jeff Smithers	<b>I</b>		Date of Receipt
Mailing Address 21726 Hardy Oak			07 09 7 2009
City	State	Zip Code	Transaction ID: C749595
San Antonio  FEC ID number of contributing federal political committee.	C	78258	Amount of Each Receipt this Period 5000.00
Name of Employer Smithers Merchant Builders	Occupation Building	n Contractor	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Matthew D. Smyth			Date of Receipt
Mailing Address 1201 L Street NW			07 21 2009
City Washington	State DC	Zip Code 20005	Transaction ID: C759424
FEC ID number of contributing federal political committee.	C	20003	Amount of Each Receipt this Period  19.24
Name of Employer American Health Care Asso- ciation		of Grassroots	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 307.83	
			5319.24

### SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Health Care Association	nd Statements may not be sold or used by any person the name and address of any political committee to Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Matthew D. Smyth Mailing Address 1201 L Street NW  City Washington  FEC ID number of contributing federal political committee.  Name of Employer American Health Care Association  Receipt For: Primary General Other (specify)	State Zip Code DC 20005  C  Occupation Director of Grassroots  Aggregate Year-to-Date  307.83	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) David Stallard  Mailing Address 1305 West Causew #212  City Mandeville  FEC ID number of contributing federal political committee.  Name of Employer Covington Suites  Receipt For: Primary General Other (specify)	State Zip Code LA 70471  C  Occupation Information Requested  Aggregate Year-to-Date ▼  3750.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Dixie Taylor-Huff  Mailing Address 932 East Baddour I  City  Lebanon  FEC ID number of contributing federal political committee.  Name of Employer Quality Care Health Center  Receipt For:  Primary General  Other (specify)	State Zip Code TN 37087-3707  C  Occupation Administrator/Owner  Aggregate Year-to-Date  3750.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	ıl) <b>&gt;</b>	2519.24

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solir or for commercial purposes, other than using the name and address of any political committee to solicit contributions from NAME OF COMMITTEE (In Full)  A. A	PAGE 40 / 58  11c 12 15 16 17
A.  Full Name (Last, First, Middle Initial)  Jan Thayer  Mailing Address 40.4 Woodland Drive  City  Grand Island  NE 68801  FEC ID number of contributing federal political committee.  Name of Employer  Excel Development Group  Chair/CED  Receipt For:  Primary General Other (specify) ▼ 3750.00  FUI Name (Last, First, Middle Initial)  Travis Tominson  Mailing Address 513 East Whitaker Mill Road  City  State Zip Code  Amount of Each R  Date of Receipt  Aggregate Year-to-Date ▼  1 Transaction ID: C  Transaction ID: C  Amount of Each R  Date of Receipt  Aggregate Year-to-Date ▼  1 Transaction ID: C  Amount of Each R  Date of Receipt  Amount of Each R  Date of Receipt  Transaction ID: C  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  Transaction ID: C  Transaction I	citing contributions a such committee.
A. Jan Thayer  Mailing Address 404 Woodland Drive  City Grand Island FEC ID number of contributing lederal political committee.  Name of Employer Excel Development Group Chair/CEO Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) B. Travis Tomlinson Mailing Address 513 East Whitaker Mill Road  City Raleigh FEC ID number of contributing lederal political committee.  Name of Employer Mayiew Con't Home Inc Receipt Toriany General Other (specify) ▼  Full Name (Last, First, Middle Initial) FEC ID number of contributing lederal political committee.  Name of Employer Mayiew Con't Home Inc Receipt Toriany General Other (specify) ▼  Full Name (Last, First, Middle Initial) Michael Torgan Mailing Address 5120 West Goldleaf Circle Suite 400  City Los Angeles CA 90056-1297  FEC ID number of contributing lederal political committee.  City Los Angeles CA 90056-1297  FEC ID number of contributing lederal political committee.  Can 90056-1297  FEC ID number of contributing lederal political committee.  Name of Employer Country Villa Health Services Receipt Toriany General Aggregate Year-to-Date ▼  Primary General  City Los Angeles CA 90056-1297  FEC ID number of contributing lederal political committee.  Name of Employer Country Villa Health Services Receipt Torians Aggregate Year-to-Date ▼  Primary General  Primary General  Coccupation Vice President, Customer Services Receipt Torians Aggregate Year-to-Date ▼  Primary General  Primary General  Primary General  Primary General	
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Primary Other (specify) ▼ 3750.00  Full Name (Last, First, Middle Initial) Travis Tornlinson  Mailing Address 513 East Whitaker Mill Road  City State Zip Code Raleigh NC 27608-2633  FEC ID number of contributing federal political committee.  Name of Employer Mayview Conv Home Inc  Receipt For: Primary General Other (specify) ▼ 2100.00  Full Name (Last, First, Middle Initial) Michael Torgan  Mailing Address 5120 West Goldleaf Circle Suite 400  City State Zip Code Transaction ID: C  Transaction ID: C  Date of Receipt  Aggregate Year-to-Date ▼  Transaction ID: C  Transaction ID: C  Amount of Each R  Date of Receipt  Transaction ID: C  Amount of Each R  C  C  City State Zip Code Transaction ID: C  Amount of Each R  C  City State Zip Code CA 90056-1297  Amount of Each R  C  City Canada Address 5120 West Goldleaf Circle Suite 400  City State Zip Code CA 90056-1297  Amount of Each R  C  Coupation Vice President, Customer Services Receipt For: Primary General  Transaction ID: C  Amount of Each R	
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SUBTOTAL of Receipts This Page (optional)	2000.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 58 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Re or for commercial purposes, other that NAME OF COMMITTEE (In Full)  American Health Care Associated in the commercial purposes and the commercial purposes and the commercial purposes and the commercial purposes are commercial purposes.	n using the name and addres	s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial Peter Van Runkle  Mailing Address 7460 Tottenhold City  New Albany  FEC ID number of contributing federal political committee.  Name of Employer Ohio Health Care Association  Receipt For:	<u>,                                      </u>		Date of Receipt  O 7
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initian Andrew S Weisman Mailing Address 5310 NW 33		225.00	Date of Receipt
Ste 211 City Fort Lauderdale FEC ID number of contributing federal political committee.  Name of Employer NuVision Management  Receipt For: Primary General	State FL  C  Occupation Vice Preside Aggregate Ye		Transaction ID: C762978  Amount of Each Receipt this Period  1250.00
Other (specify) ▼  Full Name (Last, First, Middle Initial James R. Westbury, Sr.  Mailing Address 922 McDono	ugh Road	3750.00	Date of Receipt  0 7 2 1 2 0 0 9
City <u>Jackson</u> FEC ID number of contributing federal political committee.	State GA	Zip Code 30233-1522	Transaction ID: C759403  Amount of Each Receipt this Period  500.00
Name of Employer Westbury Medical Care Home Inc Receipt For:  Primary  General Other (specify) ▼	Occupation President Aggregate Ye	ar-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page	optional)		1825.00

or for control NA An Full Der	formation copied from such Reports and S commercial purposes, other than using the ME OF COMMITTEE (In Full) nerican Health Care Association Pol I Name (Last, First, Middle Initial)	name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
An Full Der	nerican Health Care Association Pol	litical Action		
A. Der	l Name (Last, First, Middle Initial)		Committee	
	nnis W. Wheeler			Date of Receipt
	iling Address PO Box 1545		7: 0 1	07 31 2009
City Mc	y ount Pleasant	State SC	Zip Code 29465-1545	Transaction ID: C762910  Amount of Each Receipt this Period
FE	C ID number of contributing eral political committee.	C		1250.00
Nar Lau	me of Employer urel Baye Healthcare	Occupation President		
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3750.00	
<b>3.</b> <u>Bill</u>	l Name (Last, First, Middle Initial) Williamson	1		Date of Receipt
Mai	iling Address 405 Sugar Mill Rd.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City		State	Zip Code	Transaction ID: C753427
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Adv	me of Employer vantage Health Systems,	Occupation VP/COO	1	
Inc Red	ceipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		800.00	]
	l Name (Last, First, Middle Initial) ice Yarwood			Date of Receipt
Mai	iling Address 200 P Street Apt F31			07 08 7 7 9
City	y	State	Zip Code	Transaction ID: C747658
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	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)         X       11a       11b       11c       12         13       14       15       16       17
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$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
/	American Health Care Association Politi	cal Action	Committee	
	Full Name (Last, First, Middle Initial) Alan Zuccari			Date of Receipt
	Mailing Address 7712 Carlton Place			07 20 7 2009
	City	State	Zip Code	Transaction ID: C755014
	Mclean	VA	22102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1250.00
	Name of Employer Hamilton Insurance Agency	Occupation Insurance	n e Representative	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3750.00	

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1250.00
TOTAL This Period (last page this line number only)	<b>•</b>	96863.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate so for each categor Detailed Summa	ry of the
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or use a name and address of any politica	d by any person for the purpose of soliciting contributions all committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Health Care Association Po	litical Action Committee	
Full Name (Last, First, Middle Initial) Tenn Health Care Association PAC Mailing Address 28009 Foster Avenue City	State Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Nashville FEC ID number of contributing federal political committee.	TN 37224-0129	Amount of Each Receipt this Period 1000.00
Name of Employer  Receipt For:  Primary  Other (specify)   Other	Occupation  Aggregate Year-to-Date ▼	1000.00

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1000.00
TOTAL This Period (last page this line number only)	<b>•</b>	1000.00

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### **SCHEDULE B (FEC Form 3X)**

President

District:

FOR LINE NUMBER: PAGE 45/58 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Transaction ID: D88442 **BB & T CREDIT CARD** Date of Disbursement 3 1 o<sup>™</sup> 7 2009 Mailing Address 2200 Wilson Blvd Ste 200 City State Zip Code Amount of Each Disbursement this Period Arlington VA 22201-3324 956.81 Purpose of Disbursement CC Fees Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: D88441 BB & T Date of Disbursement 3 1 o<sup>M</sup>7 2009 Mailing Address PO Box 819 **Operations Center** City State Zip Code Amount of Each Disbursement this Period 27894-0819 Wilson NC 229.50 Purpose of Disbursement Bank Fees Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General

SUBTOTAL of Disbursements This Page (optional)	•	1186.31
TOTAL This Period (last page this line number only)	<b>•</b>	1186.31

Other (specify)

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$\geq$	American Health Care Association Politica	I Action C	ommittee		
	Full Name (Last, First, Middle Initial) LEADERSHIP FOR AMERICA'S FUTURE	PAC (LEA	AD PAC)		<b>Transaction ID:</b> D87555 Date of Disbursement
	Mailing Address 228 S. Washington Stree Suite 115	et			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & \check{2} & 0 & \check{0} & 9 \end{smallmatrix} \end{bmatrix} $
	Alexandria	State VA	Zip Code 22314		Amount of Each Disbursement this Period 2000.00
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	Mailing Address PO Box 3241				
	City Cheyenne	State WY	Zip Code 82003		
	City Cheyenne Purpose of Disbursement Contributions to Federal PACs/ Committees				Amount of Each Disbursement this Period 5000.00
	City Cheyenne Purpose of Disbursement Contributions to Federal PACs/ Committees Candidate Name MAKING BUSINESS EXCEL POLITICAL	WY ACTION C	82003	Category/ Type	
	City Cheyenne Purpose of Disbursement Contributions to Federal PACs/ Committees  Candidate Name MAKING BUSINESS EXCEL POLITICAL /  Office Sought:    House	WY	82003  OMMITTEE  General		Amount of Each Disbursement this Period 5000.00
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	Rep. Anna Esh Office Sought:  State: CA Full Name (Last, I STUPAK FOR  Mailing Address  City Menominee Purpose of Disbut Voided Contribution	X House Senate President District: 14 First, Middle Initial) CONGRESS  817 Ninth Aven P.O. Box 156	ue Si	Primary Other (spec	General cify) ▼  Zip Code		Гуре		Date 0 7	of Dis	burse 0	ment 6	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Perio
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	y Information copied from such Reports and S for commercial purposes, other than using the				
$\rangle$	NAME OF COMMITTEE (In Full) American Health Care Association Pol				
<u>/</u>	Full Name (Last, First, Middle Initial) CANTOR FOR CONGRESS				Transaction ID: D87552 Date of Disbursement
	Mailing Address P. O. Box 17813				07 / 07 / 2009
	City Richmond	State VA	Zip Code 23226		Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal Candidates				4000.00
	Candidate Name Rep. Eric I. Cantor			Category/ Type	
	Senate President	bursement For:  X Primary Other (spe	2010 General		
	State: VA District: 07  Full Name (Last, First, Middle Initial)  MASSA FOR CONGRESS				Transaction ID: D88137 Date of Disbursement
	Mailing Address 60 EAST MARKET S	STREET SUITE	E 244		$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 2 & 3 \\ 2 & 3 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{bmatrix}$
	City CORNING	State NY	Zip Code 14830		Amount of Each Disbursement this Period
					1500.00
	Purpose of Disbursement Contributions to Federal Candidates				1300.00
	Contributions to Federal Candidates  Candidate Name  Rep. Eric Massa			Category/ Type	1300.00
	Contributions to Federal Candidates  Candidate Name Rep. Eric Massa  Office Sought: X House District Senate President	bursement For:  X Primary  Other (spe	2010 General		1300.00
	Contributions to Federal Candidates  Candidate Name Rep. Eric Massa  Office Sought: X House District Senate	X Primary	General		Transaction ID: D88222 Date of Disbursement
	Contributions to Federal Candidates  Candidate Name Rep. Eric Massa  Office Sought:  X House Senate President State: NY District: 29  Full Name (Last, First, Middle Initial)	X Primary Other (spe	General		Transaction ID: D88222
	Contributions to Federal Candidates  Candidate Name Rep. Eric Massa  Office Sought: X House Senate President  State: NY District: 29  Full Name (Last, First, Middle Initial)  RADANOVICH FOR CONGRESS	X Primary Other (spe	General		Transaction ID: D88222 Date of Disbursement  M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
	Contributions to Federal Candidates  Candidate Name Rep. Eric Massa  Office Sought: X House Senate President State: NY District: 29  Full Name (Last, First, Middle Initial) RADANOVICH FOR CONGRESS  Mailing Address 30151 TOMAS STRICT  City RANCHO STA MRGRITA  Purpose of Disbursement Contributions to Federal Candidates	X Primary Other (spe	General cify) ▼		Transaction ID: D88222 Date of Disbursement  M 7 M / D 3 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Contributions to Federal Candidates  Candidate Name Rep. Eric Massa  Office Sought: X House Senate President State: NY District: 29  Full Name (Last, First, Middle Initial) RADANOVICH FOR CONGRESS  Mailing Address 30151 TOMAS STRICT  City RANCHO STA MRGRITA  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. George P. Radanovich	X Primary Other (spe	General cirify) ▼  Zip Code 92688		Transaction ID: D88222 Date of Disbursement  M 7 M / D 3 D / Y Y Y O Y Y  Amount of Each Disbursement this Period
	Contributions to Federal Candidates  Candidate Name Rep. Eric Massa  Office Sought: X House Senate President State: NY District: 29  Full Name (Last, First, Middle Initial) RADANOVICH FOR CONGRESS  Mailing Address 30151 TOMAS STRICT  City RANCHO STA MRGRITA  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. George P. Radanovich	X Primary Other (spe	General cify) ▼  Zip Code 92688  2010  General	Type  Category/	Transaction ID: D88222 Date of Disbursement  M 7 M / D 3 D / Y Y Y O Y Y  Amount of Each Disbursement this Period

	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)		E NUMBER: PAGE 50 / 58
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	y Information copied from such Reports and S for commercial purposes, other than using the				
$\left.\right\rangle$	NAME OF COMMITTEE (In Full)  American Health Care Association Po				<u></u>
	Full Name (Last, First, Middle Initial) FRIENDS OF GINNY BROWN-WAITI	Ē			Transaction ID: D88141 Date of Disbursement
	Mailing Address P.O. Box 865				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Brooksville	State FL	Zip Code 34605		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contributions to Federal Candidates				1000.00
	Candidate Name Rep. Ginny Brown-Waite			Category/ Type	
	Senate President	bursement For:  X Primary Other (spe	2010 General		
	State: FL District: 05  Full Name (Last, First, Middle Initial) BERMAN FOR CONGRESS				Transaction ID: D88235 Date of Disbursement
	Mailing Address 6380 Wilshire Blvd.	#1612			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Los Angeles	State CA	Zip Code 90048		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contributions to Federal Candidates				4000.00
	Candidate Name Rep. Howard L. Berman			Category/ Type	
	Office Sought:  X House Senate President State: CA District: 28	bursement For:  X Primary  Other (spe	2010 General ecify)		
	Full Name (Last, First, Middle Initial) BERMAN FOR CONGRESS				Transaction ID: D88236 Date of Disbursement
	Mailing Address 6380 Wilshire Blvd.	#1612			07 31 7 2009
	City Los Angeles	State CA	Zip Code 90048		Amount of Each Disbursement this Perio
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				Category/ Type	
	Contributions to Federal Candidates  Candidate Name  Rep. Howard L. Berman	bursement For: Primary Other (spe	2010  X General ecify)		-

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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 51 / 58									
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only										
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or for commercial purposes, other than using the name												
NAME OF COMMITTEE (In Full)												
/ American Health Care Association Politica	I Action Committee											
Full Name (Last, First, Middle Initial) BARRETT FOR CONGRESS			Transaction ID: D87539 Date of Disbursement									
Mailing Address P.O. Box 869			07									
City Westminster	State Zip Code SC 29693		Amount of Each Disbursement this Period									
Purpose of Disbursement Voided Contribution		•	-1000.00									
Candidate Name Rep. J. Gresham Barrett		Category/										
Office Sought:  X House Senate President  Disburse	ement For: 2010 Primary General Other (specify)	Турс										
State: SC District: 03												
Full Name (Last, First, Middle Initial) LANGEVIN FOR CONGRESS			Transaction ID: D88138 Date of Disbursement									
Mailing Address 181-A KNIGHT ST			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$									
City WARWICK	State Zip Code RI 02886		Amount of Each Disbursement this Period									
Purpose of Disbursement Contributions to Federal Candidates			3000.00									
Candidate Name Rep. James R. Langevin	C	Category/ Type										
Senate X President	ement For: 2010 Primary General Other (specify)											
State: RI District: 02												
Full Name (Last, First, Middle Initial) INSLEE FOR CONGRESS			Transaction ID: D88133 Date of Disbursement									
Mailing Address PO Box 686			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$									
City Selah	State         Zip Code           WA         98942-0686		Amount of Each Disbursement this Period									
Purpose of Disbursement Contributions to Federal Candidates			1000.00									
Candidate Name Rep. Jay Inslee		Category/ Type										
Senate X President	ement For: 2010 Primary General Other (specify)											
State: WA District: 01												
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	3000.00									

TOTAL This Period (last page this line number only) .....

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NAME OF	COMMITTEE (In Full) Health Care Associat				-			ion coma		0 11 0111 00			
	(Last, First, Middle Initial) OF JOHN BARROW							Date	of Disb	ID: D8			
Mailing Ade	dress 2141 W Broad	d St						o <sup>M</sup> 7	M /	<sup>D</sup> 2 3	Y 2	6 o ŏ s	) Y
City Athens		Sta G		Zip Code 30606-3545				Amou	int of E	ach Disb			
	Disbursement ns to Federal Candidates					•	7				25	500.00	)
Candidate Rep. Joh						tegory/ ype							
Office Sou	Senate President		rimary	2010 General ecify)									
State: GA Full Name	District: 12 (Last, First, Middle Initial)							Trans	actio-	<b>ID</b> : D8	7540		
	OF JOHN BARROW							Date	of Disb	ursement			
Mailing Add	dress 2141 W Broad	d St						o <sup>M</sup> 7	M /	<sup>D</sup> 0 6	2	2 0 ŏ s	) Y
City Athens		Sta G		Zip Code 30606-3545				Amou	int of E	ach Disb	ursemei	nt this F	Perio
	Disbursement ntribution	<del>_</del>					7				-10	00.00	)
Candidate Rep. Joh						tegory/ ype							
Office Sou	ght: X House Senate President District: 12		rimary	2010 General ecify)									
	(Last, First, Middle Initial) FOR CONGRESS									ID: D8			
Mailing Add	dress 301 W. Platt S	Street #385						0 <sup>M</sup> 7	M /	<sup>D</sup> 2 3	Y 2	2 0 ŏ s	) Y
City Tampa		Sta FL		Zip Code 33606				Amou	int of E	ach Disb	ursemei	nt this F	Perio
	Disbursement ns to Federal Candidates						7				1(	00.00	)
Candidate Rep. Katl						tegory/ ype	_						
Office Sou	ght: X House Senate President		rimary	2010 General									
State: FL	District: 11			· 									
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	y Information copied from such Reports and State or commercial purposes, other than using the na				
$\rangle$	NAME OF COMMITTEE (In Full) American Health Care Association Politic				
	Full Name (Last, First, Middle Initial) BRADY FOR CONGRESS				Transaction ID: D87541 Date of Disbursement
	Mailing Address P.O. Box 8277				$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 6 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $
	City The Woodlands	State TX	Zip Code 77387		Amount of Each Disbursement this Period
	Purpose of Disbursement Voided Contribution				-1000.00
	Candidate Name Rep. Kevin Brady		2010	Category/ Type	
	0 1	sement For: X Primary Other (spe	2010 General ecify) ▼		
	Full Name (Last, First, Middle Initial) LEE TERRY FOR CONGRESS				Transaction ID: D88221 Date of Disbursement
	Mailing Address 1107 So. 119th st				$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 0 & D \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & 0 & 0 & 9 \\ 2 & 0 & 0 & 9 \end{bmatrix}$
	City Omaha	State NE	Zip Code 68144		Amount of Each Disbursement this Period
	Omana				
	Purpose of Disbursement Contributions to Federal Candidates				1000.00
	Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Lee Terry			Category/ Type	1000.00
	Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Lee Terry  Office Sought:  X House Senate President  Disbur	sement For:  X Primary  Other (spe	2010 General		1000.00
	Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Lee Terry  Office Sought: X House Disbur Senate	sement For:	General		Transaction ID: D88226 Date of Disbursement
	Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Lee Terry  Office Sought:  X House Senate President State: NE District: 02  Full Name (Last, First, Middle Initial)	sement For:	General		Transaction ID: D88226
	Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Lee Terry  Office Sought:  X House Senate President State: NE District: 02  Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS	sement For:	General		Transaction ID: D88226 Date of Disbursement  M 7 M / D 3 D / Y Y Y O Y Y  Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Lee Terry  Office Sought:  X House Senate President State: NE District: 02  Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS  Mailing Address 38 Ivy St SE  City Washington Purpose of Disbursement Contributions to Federal Candidates	sement For: X Primary Other (spe	General ecify) ▼  Zip Code	Туре	Transaction ID: D88226 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Lee Terry  Office Sought:  X House Senate President State: NE District: 02  Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS  Mailing Address 38 Ivy St SE  City Washington  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Lois Capps	sement For:  X Primary Other (spe	General ecify) ▼  Zip Code 20003-4006		Transaction ID: D88226 Date of Disbursement  M 7 M / D 3 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Lee Terry  Office Sought:  X House Senate President State: NE District: 02  Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS  Mailing Address 38 Ivy St SE  City Washington  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Lois Capps  Office Sought: X House Disbur	sement For: X Primary Other (spe	General ecify) ▼  Zip Code 20003-4006  2010  General	Type  Category/	Transaction ID: D88226 Date of Disbursement  M 7 M / D 3 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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NAME OF COMMITTEE (In F American Health Care As	,	n Committee			
Full Name (Last, First, Middle MARION BERRY FOR Co	′			Transaction ID: D88124 Date of Disbursement  O 7 D 2 3 Y Y Y O 9	Y
Mailing Address P.O. BC	OX 8084				
City JONESBORO	State AR	Zip Code 72403		Amount of Each Disbursement this F	-
Purpose of Disbursement Contributions to Federal Cand	lidates			5000.00	-
Candidate Name Rep. Marion Berry			Category/ Type		
Office Sought:  X House Senate Preside State: AR  District: 0	e X Primar ent Other				
Full Name (Last, First, Middle NITA LOWEY FOR CON	Initial)			Transaction ID: D88135 Date of Disbursement	
Mailing Address PO Box	271			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} 7^{M} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} 3 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 0 \overset{Y}{0} 9 \end{bmatrix}$	Y
City White Plains	State NY	Zip Code 10605		Amount of Each Disbursement this F	-
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Candidate Name Rep. Nita M. Lowey			Category/ Type		
Office Sought:  X House Senate Preside State: NY District: 1	e X Primar ent Other				
Full Name (Last, First, Middle PATRICK MURPHY FOR	Initial)			Transaction ID: D88223 Date of Disbursement	
Mailing Address P.O. Bo	ox 868			07	Y
City Levittown	State PA	Zip Code 19058		Amount of Each Disbursement this F	Perio
Purpose of Disbursement Contributions to Federal Cand				1000.00	
Candidate Name Rep. Patrick J. Murphy			Category/ Type		
Office Sought: X House Senate	y X Primar		1 71-	-	
President State: PA District: 0		(Specify) \			

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	y Information copied from such Reports and for commercial purposes, other than using NAME OF COMMITTEE (In Full)												
<i>)</i>	American Health Care Association	Political Action Co	ommittee										
	Full Name (Last, First, Middle Initial) HALL FOR CONGRESS COMMITT	EE (RALPH HALI	L - ROCKWAL	.L			Date	saction of Disb		ent		Y	Υ
	Mailing Address POST OFFICE BO	OX 711					0 7		3 0		2	o ŏ 9	_
	City ROCKWALL	State TX	Zip Code 75087				Amou	unt of E	ach D	sburse	-	-	erio
	Purpose of Disbursement Contributions to Federal Candidates				•		L.				100	00.00	0
	Candidate Name Rep. Ralph M. Hall				atego Type								
	Senate President	Disbursement For:  X Primary Other (spe	2010 General cify)										
	State: TX District: 04  Full Name (Last, First, Middle Initial)						_			D000			
	RICHARD E NEAL FOR CONGRES	SS COMMITTEE					Date	saction of Disb	ursem	ent		· V	V
	Mailing Address 76 MAGNOLIA TE	ERRACE					0 <sup>M</sup> 7	M /	<sup>D</sup> 30		ž	o ŏ 9	Y
	City SPRINGFIELD	State MA	Zip Code 01108				Amou	unt of E	ach D	sburse	ement	this P	eric
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	Candidate Name Rep. Richard E. Neal				atego Type	-							
	Office Sought:  X House Senate President State: MA District: 02	Disbursement For:  X Primary  Other (spec	2010 General cify)										
	Full Name (Last, First, Middle Initial) FRIENDS OF ROSA DELAURO						Date	saction of Disb	ursem	ent	34		
	Mailing Address 49 HUNTINGTON	STREET					0 <sup>M</sup> 7	M /	23	/ [	ž	0 ŏ 9	Υ
	City NEW HAVEN	State CT	Zip Code 06511				Amou	unt of E	ach D	sburse	ement	this P	eric
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	Candidate Name Rep. Rosa Delauro				atego Type								
	Senate	Disbursement For:  X Primary Other (spe	2010 General cify)										
	President												
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	NAME OF COMMITTEE (In Full) American Health Care Association Politica	l Action Committee							
	Full Name (Last, First, Middle Initial) STEPHANIE HERSETH SANDLIN FOR S	OUTH DAKOTA				Disburs			V * V
	Mailing Address PO Box 2009				0 7	2	23 /	20	9 0 9
	City Sioux Falls	State Zip Code SD 57101			Amour	t of Each	Disburs		
	Purpose of Disbursement Contributions to Federal Candidates		•					100	0.00
	Candidate Name Rep. Stephanie Herseth Herseth Sandlin		Categ Typ	-					
	-	ement For: 2010 Primary General Other (specify)							
	Full Name (Last, First, Middle Initial) HOOSIERS SUPPORTING BUYER FOR	CONGRESS			Date of	Disburs	: D875 ement		YYY
	Mailing Address 200 North Main St. P.O	Box 712			0 7		0.7	2 (	9 0 9
	City Monticello	State Zip Code IN 47960			Amour	t of Each	Disburs		
	Purpose of Disbursement Contributions to Federal Candidates							100	0.00
	Candidate Name Rep. Steve Buyer		Categ Typ	-					
	Office Sought:    X   House   Disburse     Senate   President     State: IN   District: 04	ement For: 2010 Primary X Genera Other (specify)							
	Full Name (Last, First, Middle Initial) ZACK SPACE FOR CONGRESS COMMI	ITEE			Date of	Disburs			V V
					0 <sup>M</sup> 7 M	ַן ' נַי	06 /	2 0	9 0 9
	Mailing Address 714 N WOOSTER AVEN	NUE							
	Mailing Address 714 N WOOSTER AVEN	State Zip Code OH 44622			Amour	t of Each	Disburs	ement t	his Perio
	City	State Zip Code			Amour	t of Each	Disburs	ement t	
	City DOVER Purpose of Disbursement	State Zip Code	Cateç Typ		Amour	t of Each	n Disburs	-	
	City DOVER  Purpose of Disbursement Voided Contribution  Candidate Name Rep. Zack Space  Office Sought: X House Disburse	State Zip Code	Тур		Amour	t of Each	n Disburs	-	

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Detailed Summary Page	SCHEDULE B (FEC FOIIII 3X	<ul> <li>Use separate schedule(s)</li> </ul>	FOR LINE I	
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee    NAME OF COMMITTEE (In Full)	ITEMIZED DISBURSEMENTS		21b	22 X 23 24 25 :
American Health Care Association Political Action Committee  Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER  Mailing Address 509 MADISON AVE SUITE 1902  City NEW YORK NY 10022  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Sen. Charles E. Schumer  Office Sought: House NY 10022  Purpose of Disbursement City NEW YORK NY 10022  Primary General Neither Sen. Charles E. Schumer  Office Sought: House NY 10022  City NEW YORK NY 10022  City NEW YORK NY 10022  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Sen. Charles E. Schumer  Office Sought: House NY 10022  City NEW YORK NY 10022  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Sen. Charles E. Schumer  Office Sought: House NY 10022  Purpose of Disbursement Category/ Type  Transaction ID: D87550 Date of Disbursement this  Category/ Type  Transaction ID: D87550 Date of Disbursement this  Category/ Type  Amount of Each Disbursement  Office Sought: House NY 10022  Amount of Each Disbursement Category/ Type  Office Sought: House NY 89132  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Sen. Charles E. Schumer  Office Sought: House NY 89132  Disbursement Contributions to Federal Candidates Candidate Name Sen. Charles E. Schumer  Office Sought: House NY 89132  Disbursement Category/ Type  Office Sought: House NY 89132  Disbursement NY 89132  D				
Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER  Mailing Address 509 MADISON AVE SUITE 1902  City	NAME OF COMMITTEE (In Full)			
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